STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulationsec. OF STATE

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077		
1. TITLE OF NEWSPAPER The Wolsey Ne 3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLIS	103	2. DATE 9-29-10
	SHED ANNUALLY 3B. ANNUAL SUBSCRIPTION PRICE \$ 1750/2000	
VO CCACIO		
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code)		
(Not printers) 114 W. 3rdS+ POBOX 196 Miller SDS7362		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE		
PUBLISHER (Not printers)		
6. FULL NAME OF PUBLISHER: Micrael & Cavinus		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and		
addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name		
and address, as well as that of each individual must be given.		
FULL NAME	COMPLETE MA	ILING ADDRESS
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1		
PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so		
state. If more space is needed, list on back of this form.		
Jerry Tootie Kittelson		
30.19	AVERAGE NO. COPIES	ACTUAL NO. COPIES
9. EXTENT AND NATURE OF CIRCULATION	EACH ISSUED PRECEDING 12	ISSUED
	MONTHS MONTHS	NEAREST TO FILING DATE
A.TOTAL NO. COPIES (Net Press Run)	275	275
B.PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors and	ラ ☆	25
counter sales. 2. Mail Subscription	122	30
(Paid and or requested)	176	162
C.TOTAL PAID AND/OR REQUESTED CIRCULATION		2.5
(Sum of 9B1 and 9B2)	206	192
D.FREE DISTRIBUTION	4	21
1. BY MAIL, CARRIER OR OTHER MEANS	/	7
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES		
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	3.0	1910
F. COPIES NOT DISTRIBUTED	210	114
1. Office use, left over, unaccounted, spoiled after printing	.55	66
2. Return from News Agents	10	18
G.TOTAL (Sum of E, F1 and F2 - Should equal net press run	275	275
Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public		
I swear that the statements made by me are true, correct, and complete:		
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I fehred D Courses	Publisher (Title)	
(Signature) (Title)		
State of South Delegte	Sworn to before me this 30 day of Sapt, 20/10	
State of South Dakota)	1 much Kith	
County of Hand Notary Public		
My commission expires: 6-13-26		
(Seal)	my commission expires.	